RECEIVED

JAN 1 8 2011

S.D. SEC. OF STATE

12278

## State of South Dakota Statement of Financial Interest Elected Official

File statement within 15 days after taking your oath of office in the office where your nominating petition or convention nomination certification was filed. Please read information on reverse side before completing this form.

金金安市大大大学大学等的专作的大学中的大学中的大学中的大学中的大学中的大学中的大学中的大学中的大学中的大学中	·*************************************
1. Name Susan Wismer	· · · · · · · · · · · · · · · · · · ·
2. Address PO Box 147 Bri	HOD, SA 51430
3. Elected Office Representative D	istrict One
If there is no change in your financial interest since the filing of	your post nomination statement of financial interest, please sig
Date: //1/// (Signed) Loon Wisms	
If there are changes, please complete the following:	
What is your occupation/profession?	
5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.	What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.
6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.	What is the nature of your immediate family's association with each?
	· · · · · · · · · · · · · · · · · · ·
State of South Dakota )  County of )	Verification
I have reviewed paragraphs 1 through 6 of the Information Re Statement of Financial Interest and certify that the information my financial interests for the preceding calendar year.	egarding Statement of Financial Interest (attached), my neported is a complete, true and accurate representation of
Sworn to before me this day of	<b>3.61</b>
(Seal)	Officer Administering Oath
Revised 1997	My commission expires:
SECRETARY OF STATE	